

EFFECTING PROCESS IMPROVEMENT- Play Your Part

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WHAT IS A PROCESS?

- A series of steps and decision involved in the way work is accomplished.
 - Registering a patient
 - Rooming a patient
 - Scheduling a referral
 - Collecting co-pays, deductibles, and outstanding balances
 - Managing the Diabetic patient
 - Managing patients with chronic pain

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WHAT IS A PROCESS - CONT.?

- Processes can be either simple or complicated
- Processes can involve only a few people or multiple departments
- Who owns processes?
 - Everyone as a stake in one or more processes.
 - Groups of Individuals usually share in and own - the activities which make up a process.
 - The one individual who is ultimately responsible and accountable for the proper working of the process is known as the “process owner”.

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WHAT IS PROCESS IMPROVEMENT?

- ◉ Making things better
- ◉ Setting aside blaming people for problems or failures
- ◉ A way of looking at how we can do our work better.
 - Moving beyond the problem-solving approach or trying to fix what's broken - discovering the "root cause" of the difficulty. When this occurs, true change and improvement can occur.

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WHY ARE WE TALKING ABOUT THIS?

- ◉ It helps you develop a work environment and job functions that are efficient and more effective in delivering exceptional customer service.
- ◉ It is a proposed requirement of the RHC program.

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RHC REQUIREMENT

- ◉ §491.11 Quality Assessment and Performance Improvement (QAPI) - CONDITION
 - The RHC must develop, implement, evaluate, and maintain an effective, *ongoing, data-driven* quality assessment and performance improvement (QAPI) program. The self-assessment and performance improvement program must be appropriate for the complexity of the RHC's organization and services and focus on maximizing outcomes by improving patient safety, quality of care, and patient satisfaction.

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- The clinic develops program activities to measure either *safety*, *quality of care*, or *patient satisfaction*.
 - Improvement projects must be distinct, and must reflect the scope and complexity of the clinic's services and available resources.
 - The RHC must maintain records on its QAPI program and quality improvement projects.
 - Evidence of the QAPI program activity(ies) and outcome(s) must be available to the surveyor at the time of the survey.

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GETTING STARTED

- ◉ Select a Process Improvement Lead
- ◉ Changing the organization's culture – “It's not my job”, “I just work here”, or “It's management's responsibility
- ◉ Process improvement requires everyone to become a “fire preventer,” rather than a “fire fighter.”
- ◉ The focus is on improving a process over the long term, not just patching up procedures and work routines as problems occur.

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GETTING STARTED - CONT.

- ◉ If you have been putting out fires, set aside the CO₂ bottle and ask these questions:
 - What process should we select for improvement?
 - What resources are required for the improvement effort?
 - Who are the right people to improve the selected process?
 - How do we go about improving the process?

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STEP 1 - SELECT THE PROCESS TO BE IMPROVED

- ◉ Identify problem areas and prioritize.
- ◉ Start small - let people get familiar with process improvement.
- ◉ Determine process boundaries.
 - Example: The process by which co-pay, deductibles, and outstanding balances are collected.
 - *Starting Point* - The patient is informed at the time appointment is made that any co-pays, deductibles, or outstanding balances will be collected prior to being seen.
 - *Stopping Point* - Co-pays, deductibles, and outstanding balances are collected.

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STEP 1 - ESTABLISHING THE PROCESS IMPROVEMENT OBJECTIVE

- ◉ Establish a well-defined process improvement objective.
 - What improvement do we want to accomplish by using a process improvement methodology?
 - Example: The clinic/center collects 5% of all co-pays, deductibles, and outstanding balances at the point-of-service.
 - Objective: The clinic/center will collect 10% of all co-pays, deductibles, and outstanding balances at the point-of-service in 60 days with no delay in the provider's schedule.

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STEP 2 - ORGANIZING THE RIGHT TEAM

- ◉ Select people who are closely involved in the process that is being improved.
- ◉ Set Ground Rules:
 - Attendance
 - Preparation
 - Participation
 - Courtesy
 - Assignments
 - Focus

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STEP 3 - FLOW CHART THE CURRENT PROCESS

- ◉ Members must understand how it works
- ◉ Most useful tool is a Flow Chart
- ◉ The team assigns one or more members to observed the flow of work through the process

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STEP 3 - CONT.

- Current situation is defined by answering these questions:
 - Does the Flow Chart show exactly how things are done now?
 - If not, what needs to be added or modified to make it an “as-is” picture of the process?
 - Have the workers involved in the process contributed their knowledge of the process steps and their sequence?
 - After gathering this information, is it necessary to rewrite your process improvement objective?

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STEP 4 - SIMPLIFY THE PROCESS AND MAKE CHANGES

◉ Answer these questions:

- Can this step be done in parallel with other steps, rather than in sequence?
- Does this step have to be completed before another can be started, or can two or more steps be performed at the same time?
- What would happen if this step were eliminated?
- Would eliminating this step achieve the process improvement objective?
- Is the step being performed by the appropriate person?

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STEP 4 - CONT.

- Is the step a work-around because of poor training or a safety net inserted to prevent recurrence of a failure?
- Is the step a single repeated action, or is it part of a rework loop which can be eliminated?
- Does the step add value to the product or service produced by the process?
- Update Flow Chart and test the process.

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STEP 5 - IDENTIFYING ROOT CAUSES

- ◉ If the simplified Flow Chart does not give you the results you were looking for - you need to look for the root cause - why didn't this work? At what point did the process break down and why?
- ◉ Once identified, you work to improve the process.

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STEP 6 - PLAN TO IMPLEMENT THE PROCESS CHANGE

- ◉ Once root causes are identified, pick one to work on.
- ◉ Develop a plan to implement a change in the process to reduce or eliminate the root cause.
 - What steps in the process will be changed?
 - Are there any risks associated with the proposed change?
 - What will the change cost, e.g. time, money, people?
 - What employees will be affected by the change?
 - Who is responsible for implementing the change?
 - How will the implementation be controlled?
 - At what steps in the process will measurements be taken?

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STEP 7 - TEST THE CHANGE AND COLLECT DATA

- ◉ If feasible, the change should be implemented on a limited basis before it is applied to the entire organization.
- ◉ Did the process improve?
- ◉ Did the change in the process eliminated the root cause of the problem?
- ◉ Are the data collected in this step closer to the process improvement objective than the baseline data?
- ◉ Were the expected results achieved?
- ◉ Were there any problems with the plan?

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SPECIAL THANKS TO ~
IDAHO STATE OFFICE
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